

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
O.I.P.E. CLASSIFIER	K.D	59	1041
FORMALITY REVIEW		1121	10-1-2001
RESPONSE FORMALITY REVIEW	H.L	1079	10-31-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	t	✓	1/1/2001
2		✓	1/1/2001
3		✓	1/1/2001
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7		✓	1/1/2001
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9		✓	1/1/2001
10		✓	1/1/2001
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12		✓	1/1/2001
13	✓	✓	1/1/2001
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If more than 150 claims or 10 actions  
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